

REMARKS

Claims 1-13 are pending in the application. Claim 1 is the only independent claim.

The specification has been amended to incorporate section headings, while the claims have been amended to remove reference designations, all to conform to contemporary U.S. patent practice.

Claims Rejections - 35 U.S.C. §§ 102 and 103

Claims 1-3 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent No. 5,908,428 to Scirica et al. in view of U.S. Patent No. 5,792,180 to Munoz.

Claims 4-6 and 13 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent No. 5,908,428 to Scirica et al. and U.S. Patent No. 5,792,180 to Munoz in view of U.S. Patent No. 2,240,330 to Flagg et al.

Claims 7-11 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent No. 5,908,428 to Scirica et al. in view of U.S. Patent No. 5,792,180 to Munoz and further in view of U.S. Patent No. 3,918,455 to Coplan.

Claim 12 stands rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Patent No. 5,908,428 to Scirica et al. in view of U.S. Patent No. 5,792,180 to Munoz and further in view of U.S. Patent Application Publication No. 2004/0260145 by Borst et al.

Applicant has amended claim 1 herein to provide a better definition of the invention. Applicant respectfully maintains that claim 1 distinguishes the invention over

the prior art and particularly over the art relied on by the Examiner in rejecting the claims of the instant application.

Claim 1 As recited in claim 1, an atraumatic surgical needle has two tips and comprises a tubular metal shaft that is hollow from tip to tip. At least one of the tips is open. The shaft has a central portion that is equipped with a hole through which emerges a surgical thread that is anchored inside the needle.

Scirica et al., the primary reference relied on by the Examiner in rejecting applicant's claims, depicts a two-tipped surgical needle in Figures 5-7. The Scirica needle (200) is mainly a *solid* needle; it is not tubular throughout, that is, *not hollow from tip to tip*, as set forth in amended claim 1. Scirica Figure 5 depicts a pair of recesses (216 and 218) in the shaft portion of the needle that show the needle shaft to be solid at the respective recesses. Evidently, the only portion of the Scirica surgical needle that is hollow is a bulge (214) at a suture-receiving aperture (212).

Moreover, the tips of the Scirica surgical needle (200) are both *closed* conical forms, contrary to applicant's needle that is *open* at least at one end. The closed conical tips of the Scirica needle are further evidence that the needle is a solid mass and not a tube.

Applicant's hollow needle has certain advantages as to strength, use, and manufacturing techniques.

The first secondary, namely, Munoz, similarly discloses a solid surgical needle. Like the Scirica needle, the needle of Munoz Figure 7 has recesses or slots (60) that point to a solid needle structure. Like the Scirica needle, the tips of the Munoz needle are closed conical forms.

Accordingly, the Scirica and Munoz references teach away from a two-tipped surgical needle comprising a tubular metal shaft that is hollow from tip to tip, with at least one of the tips being open.

Claim 2 Claim 2 sets forth additional subject matter that distinguishes over the prior art and particularly over the cited references, Scirica et al. and Munoz. As set forth in claim 2, the tips of the needle are bevelled in one or more oblique planes.

The tips of the needles of Scirica et al. and Munoz are conical, not beveled in one or more oblique planes. Cones have a continuous curved surface, without any planes. No one refers to a conial surface as being bevelled.

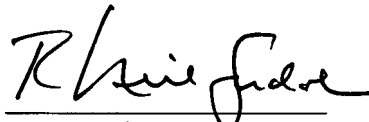
Conclusion

For the foregoing reasons, independent claim 1, as well as the claims dependent therefrom, is deemed to be in condition for allowance. An early Notice to that effect is earnestly solicited.

Should the Examiner believe that direct contact with applicant's attorney would advance the prosecution of this application, the Examiner is invited to telephone the undersigned at the number below.

Respectfully submitted,

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